

<b>Issue Classification</b>				Application/Control No.				Applicant(s)/Patent under Reexamination			
				10/659,727				FORKEY ET AL.			
				Examiner Brandi N. Thomas				Art Unit 2873			

ORIGINAL				CROSS REFERENCE(S)								
CLASS	SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)									
359	642	385	34	84	92	93						
INTERNATIONAL CLASSIFICATION												
G 0	2 B	11/00										
G 0	2 B	13/00										
G 0	2 B	15/00										
G 0	2 B	17/00										
G 0	2 B	25/00										
<i>Brandi Thomas 3/15/06</i> (Assistant Examiner) (Date)											Total Claims Allowed: 25	
<i>Patrick Ann Jones</i> (Legal Instruments Examiner) (Date) <i>3-21-06</i>				(Primary Examiner) (Date)							O.G. Print Claim(s)	O.G. Print Fig.
											1	6D, E, and 6F

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
1	1		31		91		121
2	2		32		92		122
	3		33		93		123
3	4		34		94		124
4	5		35		95		125
5	6		36		96		126
6	7		37		97		127
7	8		38		98		128
8	9		39		99		129
9	10		40		100		130
10	11		41		101		131
	12		42		102		132
11	13		43		103		133
12	14		44		104		134
13	15		45		105		135
14	16		46		106		136
15	17		47		107		137
16	18		48		108		138
17	19		49		109		139
18	20		50		110		140
19	21		51		111		141
20	22		52		112		142
21	23		53		113		143
22	24		54		114		144
23	25		55		115		145
24	26		56		116		146
25	27		57		117		147
	28		58		118		148
	29		59		119		149
	30		60		120		150

<b>Issue Classification</b>				Application/Control No.	Applicant(s)/Patent under Reexamination	
				10/659,727	FORKEY ET AL.	
				Examiner	Art Unit	
				Brandi N. Thomas	2873	

ORIGINAL				CROSS REFERENCE(S)															
CLASS		SUBCLASS		CLASS		SUBCLASS (ONE SUBCLASS PER BLOCK)													
359		642																	
INTERNATIONAL CLASSIFICATION																			
G	0	2	B	3/00															
G	0	2	B	7/00															
G	0	2	B	9/00															
				/															
																Total Claims Allowed:			
(Assistant Examiner) (Date)												O.G. Print Claim(s)		O.G. Print Fig.					
(Legal Instruments Examiner) (Date)				(Primary Examiner) (Date)															

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
211		241		301		331	
212		242		302		332	
213		243		303		333	
214		244		304		334	
215		245		305		335	
216		246		306		336	
217		247		307		337	
218		248		308		338	
219		249		309		339	
220		250		310		340	
221		251		311		341	
222		252		312		342	
223		253		313		343	
224		254		314		344	
225		255		315		345	
226		256		316		346	
227		257		317		347	
228		258		318		348	
229		259		319		349	
230		260		320		350	
231		261		321		351	
232		262		322		352	
233		263		323		353	
234		264		324		354	
235		265		325		355	
236		266		326		356	
237		267		327		357	
238		268		328		358	
239		269		329		359	
240		270		330		360	